

**IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

AMELIA RIOS, ROBERT GREEN
and SAYRA GREEN,

§§

Plaintiffs,

§§

V.

§§

CIOX HEALTH, LLC, HEALTHPORT TECHNOLOGIES, LLC, SCANSTAT, L.P., NORTH SHORE AGENCY, INC., NIX HOSPITALS SYSTEM, LLC, and PARTNERS IN PRIMARY CARE, P.A.,

Civil Action No. 5:18-CV-00538-FB

Defendants.

8

Supplemental Exhibits to Nix Hospitals System, LLC and ScanSTAT,

L.P.'s Motion to Dismiss Pursuant to Fed. R. Civ. P. 12(b)(6) (Doc. 27.)

**IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

DECLARATION OF CHAD TILLMAN

I, Chad Tillman, declare as follows:

1. The facts stated in this declaration are based on my personal knowledge and, if called as a witness, I could and would testify competently to the facts set forth below. I am the Vice President of Client Services with ScanSTAT Technologies, L.P. I submit this declaration in support of Nix Hospitals System, LLC and ScanSTAT, L.P.'s Motion to Dismiss Pursuant to Fed. R. Civ. P. 12(b)(6). Doc. 27.

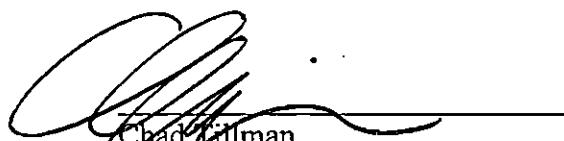
2. Attached hereto as **Exhibit E** is a true and correct copy of the invoice # 7827BCB32A694A44AB87 which reflects charges related to the May 27, 2016 and May 31, 2016 requests for the medical records of Amelia Rios submitted by Riley & Riley Attorneys at Law (“Riley”).

3. Attached hereto as **Exhibit F** is a true and correct copy of the invoice # 06697ACFD4894A6EA27D which reflects charges related to the November 18, 2016 request for the medical records of Sayra Green submitted by Riley.

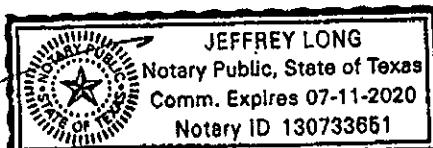
4. Attached hereto as Exhibit G is a true and correct copy of invoice # 08FBA9FFDEC64CD7B620 which reflects charges related to the September 1, 2017 request for medical records of Robert Green submitted by Riley.

5. I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed this 13th day of August, 2018.



Chad Gillman
VP of Client Services



*Sworn to and subscribed before me this 13th day
of August, 2018.
My commission expires 7/11/2020.*

CERTIFICATE OF SERVICE

I hereby certify that the foregoing document, the Declaration of Chad Tillman, was electronically filed with the Clerk of the Court using the ECF-system for the Western District of Texas and that the ECF-system will send a Notice of Electronic Filing to the all counsel of record on this the 13th day of August, 2018:

/s/Charles A. Deacon
Charles A. Deacon

EXHIBIT E



288 S Main St
Suite 600
Alpharetta, GA 30009-7916
(770) 569-2445

Billing Date: 6/1/2016
Due Date: 7/1/2016
Amount Due: \$84.17
Invoice #: 7827BCB32A694A44AB87

Billing Address	Patient Information	Shipping Address
RILEY & RILEY ATTORNEYS AT LAW 320 LEXINGTON AVENUE SAN ANTONIO , TX 78215	NAME: AMELIA RIOS MRN: 565938	RILEY & RILEY ATTORNEYS AT LAW 320 LEXINGTON AVENUE SAN ANTONIO , TX 78215

MEDICAL RECORD SOURCE	Records were ordered from:
	NIX MEDICAL CENTER - TX 414 NAVARRO SAN ANTONIO , TX 78205

QUANTITY	ITEM DESCRIPTION	UNIT PRICE	TOTAL
1	Release Basic Fees	\$45.74	\$45.74
1	Shipping	\$1.30	\$1.30
1	Digital Copy - Copy Fee 1-1	\$37.13	\$37.13
	Subtotal		\$84.17
	Sales Tax		\$0.00
	AMOUNT DUE		\$84.17

IMPORTANT NOTICE:

In most cases the invoice amount is determined and controlled by your states legislated rates.
Please pay within 30 days. Otherwise, it is our policy to defer to a collection agency!
50% Cancellation Fee!

MESSAGES
These records were processed by a ScanSTAT affiliate company. All of our professionals work hard to process your records quickly, securely and accurately. On behalf of all our employees, affiliates and their families, thanks for paying promptly.

PLEASE RETAIN THIS PORTION FOR YOUR RECORDS

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

RILEY & RILEY ATTORNEYS AT LAW
320 LEXINGTON AVENUE
SAN ANTONIO , TX 78215

INSTRUCTIONS

- 1) Please send payments only to the address listed on this invoice.
- 2) Please DO NOT SEND CASH.
- 3) Pay by check, credit card or money order.
- 4) Please pay the total amount due listed on this invoice.

For questions regarding your account or invoice

(770) 569-2445 Mon - Fri 8:00AM - 5:00PM ET

Email - cust-service@ScanSTAT.com

Federal Tax ID#: 27-0786975

We now accept credit card payments by phone



Billing Date: 6/1/2016

Due Date: 7/1/2016

Amount Due: \$84.17

Invoice #: 7827BCB32A694A44AB87

(MUST SUBMIT BARCODE BELOW WITH PAYMENT)



7827BCB32A694A44AB87

ScanSTAT Technologies
288 S Main St Suite 600
Alpharetta, GA 30009-7916



EXHIBIT F



288 S Main St
Suite 600
Alpharetta, GA 30009-7916
(770) 569-2445

Billing Date: 11/21/2016
Due Date: 12/21/2016
Amount Due: \$91.28
Invoice #: 06697ACFD4894A6EA27D

Billing Address	Patient Information	Shipping Address
RILEY & RILEY 320 LEXINGTON AVE SAN ANTONIO , TX 78215	NAME: SAYRA GREEN MRN: 720007	RILEY & RILEY 320 LEXINGTON AVE SAN ANTONIO , TX 78215

MEDICAL RECORD SOURCE	Records were ordered from:
	NIX MEDICAL CENTER - TX 414 NAVARRO SAN ANTONIO , TX 78205

QUANTITY	ITEM DESCRIPTION	UNIT PRICE	TOTAL
1	Release Basic Fees	\$45.74	\$45.74
1	Shipping	\$1.30	\$1.30
1	Certification Fee	\$1.00	\$1.00
1	Notary	\$6.00	\$6.00
1	Digital Copy - Copy Fee 1-1	\$37.24	\$37.24
	Subtotal		\$91.28
	Sales Tax		\$0.00
	AMOUNT DUE		\$91.28

IMPORTANT NOTICE:

In most cases the invoice amount is determined and controlled by your states legislated rates.
Please pay within 30 days. Otherwise, it is our policy to defer to a collection agency!
50% Cancellation Fee!

MESSAGES
These records were processed by a ScanSTAT affiliate company. All of our professionals work hard to process your records quickly, securely and accurately. On behalf of all our employees, affiliates and their families, thanks for paying promptly.

PLEASE RETAIN THIS PORTION FOR YOUR RECORDS

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

RILEY & RILEY
320 LEXINGTON AVE
SAN ANTONIO , TX 78215

INSTRUCTIONS

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For questions regarding your account or invoice
(770) 569-2445 Mon - Fri 8:00AM - 5:00PM ET
Email - cust-service@ScanSTAT.com

Federal Tax ID#: 27-0786975

We now accept credit card payments by phone



Billing Date: 11/21/2016

Due Date: 12/21/2016

Amount Due: \$91.28

Invoice #: 06697ACFD4894A6EA27D

ScanSTAT Technologies
288 S Main St Suite 600
Alpharetta, GA 30009-7916

XXXXXXXXXXXXXXXXXXXX

(MUST SUBMIT BARCODE BELOW WITH PAYMENT)



06697ACFD4894A6EA27D

EXHIBIT G



P.O. Box 2480
Roswell, GA 30077-2480
(770) 569-2445

Billing Date: 10/3/2017
Due Date: 11/2/2017
Amount Due: \$92.30
Invoice #: 08FBA9FFDEC64CD7B620

Billing Address	Patient Information	Shipping Address
RILEY & RILEY 320 LEXINGTON AVE SAN ANTONIO , TX 78215	NAME: ROBERT GREEN MRN: 690034	RILEY & RILEY 320 LEXINGTON AVE SAN ANTONIO , TX 78215

MEDICAL RECORD SOURCE	Records were ordered from:	NIX ORTHO SURGERY CLINIC - TX 003 414 NAVARRO, SUITE 1128 SAN ANTONIO , TX 78205

QUANTITY	ITEM DESCRIPTION	UNIT PRICE	TOTAL
1	Release Basic Fees	\$25.00	\$25.00
1	Shipping	\$1.30	\$1.30
1	Certification Fee	\$15.00	\$15.00
1	Notary	\$6.00	\$6.00
20	Duplication Fee 1-20		\$0.00
90	Duplication Fee 21-9999	\$0.50	\$45.00
	Subtotal		\$92.30
	Sales Tax		\$0.00
	AMOUNT DUE		\$92.30

IMPORTANT NOTICE:

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MESSAGES
These records were processed by a ScanSTAT professional. All of our professionals work hard to process your records quickly, securely and accurately. On behalf of all our employees, affiliates and their families, thanks for paying promptly.

PLEASE RETAIN THIS PORTION FOR YOUR RECORDS

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

RILEY & RILEY
320 LEXINGTON AVE
SAN ANTONIO , TX 78215

INSTRUCTIONS

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- 3) Pay by check, credit card or money order.
- 4) Please pay the total amount due listed on this invoice.

For questions regarding your account or invoice

(770) 569-2445

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Federal Tax ID#: 27-0786975

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Billing Date: 10/3/2017

Due Date: 11/2/2017

Amount Due: \$92.30

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Roswell, GA 30077-2480

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